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to occur in the majority of cases of inebriety when there are no symptoms of intoxication. He may suddenly follow a line of conduct considered but abandoned before, and carry it on with vigor for days or weeks and then stop abruptly, indicating the close of the trance, and go on after with no reference to what he had done. Crimes are sometimes done in this state, with the most conclusive evidence of no memory of it whatever afterward. Even slight drinking often occasions blanks of memory so complete that others must inform the patient what has occurred. One wakes up, as it were, and finds himself in a Turkish bath with no idea of how he came there. This alternative state is perhaps best illustrated in periodic drinkers with long intervals between spreeds. All inebriates are bad witnesses as to themselves or their surroundings. The problem of responsibility for crime in such cases is a large field for future study. The relation of these phenomena to epileptic trances, as *e. g.* of the kind lately described by Dr. Hammond to account for mysterious disappearances, and to cases of hypnotic trance, multiple personality, etc., is yet to be traced.

Ueber die therapeutische Verwendung der Hypnose. Dr. RICHARD SCHULZ. *Neurologisches Centralblatt*, Nov. 1887.

A grave case of hysterical paraplegia, of two years' duration, in a seventeen-year old peasant girl who had been unaffected by other methods of treatment, was almost entirely cured by a few weeks of hypnotic suggestion. This case was studied with indefatigable diligence, and the exact extent of dermal anaesthesia for different tactile stimuli was carefully determined, and its changes shown by convenient illustrations. The same care was also directed to the demarcation of retinal insensibility. The description of the gradual development of the hypnotic state and of its curative effects is interesting in itself, and is made still more so by the fact that Dr. Schulz is himself a good hypnotic subject and gives his own impressions of the subjective nature of the hypnotic state. He inclines to Heidenhain's opinion that the cause of this state is the inhibition of ganglion cells of the cortex, induced by faint but prolonged stimuli of the facial, auditory, or optic nerve. With his patient, he believes the psychic impression that he possessed some marvellous mystic power played the leading therapeutic role. The reason German physicians have been less eager to follow the lines of investigation opened by Charcot and his school at Paris, and by Bernheim, Liebeault and Beaunis of Nancy, is, he thinks, that electricity and the Weir-Mitchell and Playfair-Burkart modes of treatment have been so much more widely used in Germany than in France, and with such good results; but strongly dissents from an opinion expressed by a recent writer, that German medicine should maintain an attitude of coolness toward the entire problem of hypnotism.

Two interesting new cases of hystero-traumatic paralysis in men are reported from Charcot's clinique in *Le Progrès Médical* for Jan. 22, 1887. A waiter, aged twenty-nine, of neuropathic heredity and history, was bruised by a vehicle. He often repeated the details of the accident in the ensuing delirium, but quite differently from the real facts, which seemed to indicate forgetfulness of all that took place at the moment of the accident. He experienced intense cerebral commotion followed by

the traumatic retrograde amnesia of Ribot and Azam. There was increasing immobility of the limbs; absolute anaesthesia of the pharynx such that the finger could be thrust to the epiglottis without the least reaction. Hearing was reduced and the field of vision was obscured concentrically in both eyes. The dermal anaesthesia extended over the entire surface of the lower limbs, save only the entire sole of the right and the anterior half of the sole of the left foot. This mode of limitation of anaesthesia is very different from that produced in organic lesions of the spinal cord, where the insensibility extends over the lower abdominal regions, and is marked off from the normal parts near the umbilicus by a line nearly perpendicular to the axis of the body. The delimitation rather corresponds quite closely, as is shown by plates, to that produced in hypnotized hemianaesthetic subjects when in the somnambulant stage paralysis is suggested on the normal side. The explanation for this case is therefore the following: At the instant of the accident the patient lost consciousness for several hours, and afterwards lay for several days in a state of torpor or obnubilation, propitious for the efficacy of suggestion. "Local shock" left the limbs weak, and the idea of paralysis was auto-suggested, which was aided to vividness by emotional perturbation. It is possible that the idea thus developed was that the limbs were crushed and even removed. *Schreck-lähmungen*, fear-pareses, and the sentiments of feebleness produced by strong emotions probably exhibit parts of the same mechanism or terms of the same series of not yet well ordered phenomena. If this explanation be correct, this case is an illustration of reflex unconscious cerebration where the centre of the diastaltic arc is that part of the cortex representing the centres of voluntary psychic movement, mental unity being thus easily dissociated, so that adjacent regions are unaffected. The fact that the paresis had suddenly vanished in a convulsive attack confirms diagnosis of hysteric symptoms, but the anaesthesia was not reduced.

The second case is that of an athletic man of twenty-five, of imaginative and moody temperament. After a slight contusion on the shoulder he conceived the idea that the entire right arm was removed and a heavy weight hung in its place. Sensibility was reduced in the field of special senses and over the entire dermal surface of the body. Although not hypnotizable, the state of suggestibility is developed by the cerebral disturbance produced by nervous shock.

Note sur l'écriture hystérique. A. BINET. Rev. Philosophique, Jan., 1887.

In the case of hypnotics who write, as they think, conformably to the character of the personality impressed upon them, it is possible that a mental model furnished by memory may have been copied. If so, these cases are of small use to the graphologist who seeks in writing the unconscious expression of character. M. Binet states it as a law that all sensory excitement produced by colors, a magnet, praise, etc., excite in hyperexcitable subjects a general dynamogenesis causing enlarged and often more rapid writing. The character of the sentiment written often instinctively enlarges the script, which in such subjects is soon reduced by fatigue to perhaps even less than its normal size. Excitation and depression are thus directly mirrored.